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<b>&gt;</b> .		Application Number	10/025,790-Conf. #5866			
FEE TRANSI	VIIIIAL	Filing Date	December 26, 2001			
For FY 20	06	First Named Inventor	Mingzhi Ll			
· · · · · · · · · · · · · · · · · · ·		Examiner Name	J. Joo			
X Applicant claims small entity state	us. See 37 CFR 1.27	Art Unit	2154			
TOTAL AMOUNT OF PAYMENT	(\$) 455.00	Attorney Docket No.	LUN-0200			
METHOD OF PAYMENT (check	all that apply)					
Check Credit Card	Money Order No	ne Other (please id	lentify):			

METHOD OF	PAYMENT (	(check all	that apply)						
Check	Credit Card	<b>.</b>	Money Order	None	Other (	please identi	fy):		
X Deposit Acc	ount Deposit	Account Num	nber: 18-0013	Deposit Accoun	t Name:	Rader, I	Fishman & G	rauer PLLC	<u>.</u>
For the a	bove-identifie	ed deposit	account, the D	irector is he	reby authorize	ed to: (check	( all that apply)		
x Ch	arge fee(s) in	dicated be	elow		Charge	e fee(s) indi	cated below, e	xcept for the	e filing fee
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FEE CALCUL				-	iling or may	be subjec	t to a surch	arge.)	
1. BASIC FILING	s, SEARCH, A		MINATION FEI IG FEES		CH FEES	EXAMIN.	ATION FEES	<b>:</b>	
		I ILII	Small Entity	JLAN	Small Entity	L/V-IVIII4/	Small Entity		
Application Ty	pe	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	<u>Fee (\$)</u>	Fee (\$)	Fees Pa	<u>aid (\$)</u>
Utility		300	150	500	250	200	100		
Design		200	100	100	50	130	65		
Plant		200	100	300	150	160	80		
Reissue		300	150	500	250	600	300		
Provisional		200	100	0	0	0	0		<del></del>
2. EXCESS CLA	IM FEES							Fee (\$)	Small Entity Fee (\$)
Fee Description Each claim over	20 (including	Reissues	.)					50	25
Each independer	_	_						200	100
Multiple depend								360	180
Total Claims	Extra Cla	aims	Fee (\$)	Fee Pai	d (\$)	Mu	Itiple Depend	ent Claims	
	. =	x	=			Fee	(\$)	Fee Paid (\$)	
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Indep. Claims	Extra Cla	aims	Fee (\$)	Fee Pai	d (\$)			•	
110	- =	x	<del></del>						
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SUBMITTED BY		<del>//</del> =				-			
	///	//			gistration No.	22,663			
Signature	1 1/1/1 }	A = A		Re	gistration No.	20,311	Telephone	(202) 955	-3750

SUBMITTED BY			
Signature	Registration No. (Attorney/Agent) 22,663 29,211	Telephone	(202) 955-3750
Name (Print/Type)	David T. Nikaido Carl Schaukowitch	Date	July 26, 2006